

**TENNESSEE DEPARTMENT OF EDUCATION  
CHURCH-RELATED (SATELLITE) HOME SCHOOL  
REGISTRATION FORM**

**To be completed by parent(s) conducting a home school under the supervision of a church-related school.**

A "home school" is a school conducted by parent(s) or legal guardian(s) for their own children. This form may be utilized by parent(s) or guardian(s) to register children in grades 9-12 with the local school district which they would otherwise attend as required by T.C.A. 49-6-3050. Please note that:

Parent-teachers registered with such organization for conducting a home school for children in grades nine (9) through twelve (12) shall possess at least a high school diploma or GED, and shall have such grade nine (9) through twelve (12) students administered an annual standardized achievement test or the Sanders Model of value-added assessment, whichever is in use in that LEA and is sanctioned by the state board of education.

The church-related (satellite) school is defined in the T.C.A. 49-50-801. **Please complete both copies of the form and return both copies to your local public school superintendent's office at the time of registration with the church related school. If you decide at any time to discontinue home schooling or have a change of address, please notify your local public school superintendent as soon as possible. Students in Grades 9-12, under the supervision of a church-related school, are required by law to register with the local public school system and the church-related school.**

**PLEASE PRINT**

**PART I. STUDENT INFORMATION**

**GRADES 9-12.** For each student in Grades 9-12, list the following:

Last Name	First Name	Grade	Date of Birth (Optional)	Social Security No. (Optional)
1.				
2.				
3.				
4.				

**TENNESSEE DEPARTMENT OF EDUCATION CHURCH RELATED (SATELLITE) HOME  
SCHOOL REG. FORM (cont'd)**

**PART II. PARENT OR LEGAL GUARDIAN INFORMATION**

**Provide Information Only for Parent(s) or Legal Guardian Who Will Teach**

Last Name      First Name

**A. NAME OF PARENT(S)  
OR LEGAL GUARDIAN**

List ONLY Parent(s) or  
Legal Guardian Who Will Teach

(mother) \_\_\_\_\_

(father) \_\_\_\_\_

(guardian) \_\_\_\_\_

**B. HOME (MAILING) ADDRESS**

\_\_\_\_\_

City \_\_\_\_\_ Zip Code \_\_\_\_\_

**NAME OF THE CHURCH-RELATED SCHOOL IN WHICH YOU HAVE REGISTERED  
(Optional)**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**LIST OF COURSES TO BE TAUGHT (optional):**

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_